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APPLICANTS					
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** CONTINUING DATA ***** <i>RHS</i> <i>None</i>					
** FOREIGN APPLICATIONS ***** <i>RHS</i> <i>None</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **					
** 05/06/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Robert H. Sait</i> <i>RHS</i> Examiner's Signature Initials		STATE OR COUNTRY OK	SHEETS DRAWING 7	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 2
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TITLE					
Desiccant bottle cap					
FILING FEE RECEIVED 485	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____		

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